PTO/88/06 (06-03)
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| PATENT APPLICATION FEE DETERMINATION RECORD  8ubstillute for Form PTO-876  |                                    |              |   |  |                    |                 |  | 72 | 101660696          |                        |  |
|--|------------------------------------|--------------|---|--|--------------------|-----------------|--|----|--------------------|------------------------|--|
| CLAIMS AS FILED<br>(Column 1)  |                                    |              | ) PART I<br>(Column 2)                      |  |                    | SMALL ENTITY    |  | OR |                    | ER THAN<br>L ENTITY    |  |
| FOR  | NUMB                               | NUMBER FILED |   | NUMBER EXTRA                           |                    | RATE            | FEE  | 7  | RATE               | FFF                    |  |
| BASIC FEE  |                                    | CITTICE      | <u> </u>                                    |  |                    | TATE            |  | ┥  | MIE                | FEE                    |  |
| (37 CFR 1.16(a))<br>TOTAL CLAIMS   | <del> </del>                       | <del></del>  |   | ·                                      | -                  | <b> </b>        | <del>-   '-   -  </del>                          | OR |                    | 1-1-76                 |  |
| (37 CFR 1.18(c)) INDEPENDENT CLAIMS  | ļ                                  | minus        | 20  | ······································ | 4                  | X 1             | <del>                                     </del> | OR | × 3                |                        |  |
| (37 CFR 1.18(b))   |                                    | minus 3 · ·  |   | ······                                 | 4                  | x 8             | 11   | OR | X \$*              |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))  |                                    |              |   |  |                    | +1=             |  | OR | +1=                |                        |  |
| " If the difference in column 1 is less than zero, enter "0" in column 2.  |                                    |              |   |  |                    | TOTAL           |  | OR | TOTAL              | pa.                    |  |
| CLAIN  | AS AS AM                           | ENDE         | D - PART II                                 |  |                    |                 |  |    |                    | /                      |  |
| KCE "  | olumn 1)                           |              | (Column 2                                   | (Column 3)                             |                    | SMALL           | ENTITY   | OR |                    | R THAN<br>ENTITY       |  |
| 12/ /  | CLAIMS                             | Π            | HIGHEST                                     | PRESENT                                | 1 [                |                 | T  | 7  |                    | T                      |  |
| = 104/c  | EMAINING<br>AFTER<br>IENDMENT      |              | NUMBER<br>PREVIOUSL<br>PAID FOR             |  | П                  | RATE            | ADDI-<br>TIONAL<br>FEE                           |    | RATE               | ADDI-<br>TIONAL<br>FEE |  |
| Total Property   | 36                                 | Minus        | 37  |  | 1                  | X \$ =          |  | OR | X 8 =              |                        |  |
| Z Independent '  | 7                                  | Minus        | 7   |  |                    | x \$ _=         |  | OR | × : :              |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |                                    |              |   |  | lt                 |                 | l  | OR |                    |                        |  |
|  |                                    |              |   |  | L                  | TOTAL           |  |    | TOTAL              |                        |  |
|  |                                    |              |   |  |                    | ADD'L FEE       | L  | OR | ADD'L FEE          |                        |  |
|  | claims I                           |              | (Column 2)                                  | (Column 3)                             | r                  |                 |  | ]  | <del></del>        |                        |  |
| CO RE  | MAINING<br>VFTER<br>INDMENT        |              | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA                       |                    | RATE            | ADDI-<br>TIONAL<br>FEE                           |    | RATE               | ADDI-<br>TIONAL<br>FEE |  |
| Total CFR 1.19(c)  | TOWALTT!                           | Minus        | **  | 1-                                     |                    | x s =           | 120  | 00 | x \$=              |                        |  |
| Total  Total  Total  (I) Toral (I) Toral   |                                    | Minus        | ***   | 1=                                     | -                  |                 |  | OR |                    |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |                                    |              |   |  | F                  | K \$=           |  | OR | X \$=              |                        |  |
| FIRST PRESENTATION   | OF MUCTIPLE                        | DEPENDI      | ENT CLAIM (37 C                             | JER 1.18(0))                           |                    | S=              | ——   | OR | TOTAL =            |                        |  |
|  |                                    |              |   |  |                    | ADD'L FEE       |  | OR | ADD'L FEE          |                        |  |
| (Co  | lumn 1)                            |              | (Column 2)                                  | (Column 3)                             |                    |                 |  | _  |                    |                        |  |
| REA A  | LAIMS<br>MAINING<br>FTER<br>NOMENT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                       |                    | RATE            | ADDI-<br>TIONAL<br>FEE                           |    | RATE               | ADDI-<br>TIONAL<br>FEE |  |
| Total (37 CFR 1,16(c))   |                                    | Minus        | ••  |  | ,                  | s =             |  | OR | x s =              |                        |  |
| Total  Total  Total  Grentiscii  Independent  Of CFR 1.16(a)  Total  |                                    | Minus        |   | =.                                     | 1                  | \$=             |  | OR | x \$=              |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |                                    |              |   |  |                    | s_ =            |  | OR | + 5=               |                        |  |
|  | <del></del>                        |              |   |  | Ţ                  | OTAL<br>DD1 FEE |  | OR | TOTAL<br>ADD'L FEE |                        |  |
| If the entry in column 1 If the "Highest Number If the "Highest Number Phishest Number Phishes | Previously Previously Pr           | aid For" I   | IN THIS SPACE<br>N THIS SPACE               | is less than 20, els less than 3, ent  | nter "3"<br>er "3" | 20 <sup>-</sup> |  |    | _                  |                        |  |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the · USPTO to process) an application. Confidentiality is governed by 35 U.S.C 122 and 37 CFR 1.14 This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestion form to the USF FU. Firm will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.